24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

SCHEDULE E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
PROTECTING OUR VOTE PAC	C C00509463
Check If X 24-hour report 48-hour report New report Amends report filed	d on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
CensusChannel LLC	Date M M / D D / Y Y Y Y Y Y Y Y Y
Mailing Address 4410 E Claiborne Square	
Suite 334	Amount
City State Zip Code	10000.00
Hampton VA 23666	Transaction ID : SE.4177
Purpose of Expenditure Canvassing Category/ Type Office	ce Sought: House State: NE Senate District: 02
Name of Federal Candidate Supported or Opposed by Expenditure:	President
JOHN W JR EWING	eck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disl	bursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
	M = M / D = D / Y = Y = Y
Mailing Address	
	Amount
City State Zip Code	
Purpose of Expenditure Category/ Type Offi	ce Sought: House State:
Name of Federal Candidate Supported or Opposed by Expenditure:	President District:
	eck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	bursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	10000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	10000.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Marcus S. Mason [Electronically Filed]	11 05 2012
Signature Date	2012